



Tip Sheet

# WHY ENGAGE FRONTLINE STAFF WHEN IMPLEMENTING A NEW PRACTICE?

## FIVE IMPORTANT REASONS

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**W**hen an organization implements new practices, programs, or policies, it is a complex process of change that relies on many factors. One of the most important factors is making sure to include all relevant stakeholders in the design, development, and execution of an implementation plan – especially frontline providers. The input of frontline providers is vital to the adoption and sustainability of organizational change to support the full and effective use of new practices. This tip sheet offers five critical reasons to integrate frontline providers throughout the process of implementing a new practice, program, or policy at your organization.



### Diversity of Experience



An implementation team with diverse voices is greater than the sum of its parts. In general, teams with diverse work experiences are more successful than teams comprised of only organizational leaders. New practices are what need to be done. “Crowdsourcing” how to use new practices from individuals who represent multiple levels of an organization can lead to more creative solutions than relying on leadership alone.<sup>1</sup>

### Program Feasibility



Frontline providers deliver services to clients every day. They know the unique challenges of the work and may have a different perspective on whether the new practice, program, or policy you are proposing will be achievable in their setting.<sup>2</sup> Frontline providers may be more pragmatic about what can be done and how it might be achieved most successfully. Without frontline input, leadership may design overambitious changes or changes that cannot work in their setting.

### Leveraging Resources



Frontline providers are also aware of talents and resources available on the ground-level of the organization that might help your new practice, program, or policy succeed. Frontline providers can highlight signature strengths that support innovation and engagement. This may include informing leadership about the unique strengths of staff and opportunities in their setting, as well as championing the new initiative to colleagues who may need some extra convincing.

## Provider Buy-In



Change can be hard. By asking providers to change their role or take on a new task, you may be asking them to change their professional identity and sense of independence. If frontline providers' voices are considered during the preparation phase and throughout the implementation process, the program will be a better fit with existing practice, resources, and roles. As a result, providers' satisfaction will be higher, they will be more likely to “buy in” to the changes, and the new practice, program, or policy will be more likely to be sustained.<sup>3</sup> Stakeholder consultation should be an ongoing process, not a one-time exercise.

## Feedback Loop



After a new practice, program, or policy begins, frontline providers are your eyes and ears on the ground and facilitate a timely response to any issues that may arise. A stakeholder does not have to be a “convert” to the new program to be helpful, but simply be willing to give an honest answer to the question, “How is the change going?” Frontline providers can help to inform leadership about problems that come up, generate practical solutions, observe if people are following new practices correctly, remediate with colleagues, onboard new staff, and sustain the program long after leadership has moved on to other priorities.<sup>4</sup> As information is fed back to leadership about how the change is going, leadership can work to make changes that then refines and informs practice on the ground. This feedback loop is critical for ongoing quality improvement and success of the initiative.

## Ideas for engaging frontline providers:

- ✓ Establish a provider advisory board to help design the new practice, program, or policy.
- ✓ Observe clinical work and ask non-judgmental questions to better understand workflow.
- ✓ Design a mechanism to elicit feedback (like an online form, conference calls, or a comments box) before, during, and after the new program goes live. Ensure that this information is utilized and then any response is fed back providers.
- ✓ Foster ongoing relationships with frontline champions or key informants you can turn to when you have questions.
- ✓ Build trust by taking frontline concerns seriously, empathizing with challenges, leveraging resources where needed, and feeding results and successes back to your frontline champions.

## References

1. Stewart, R. E., Williams, N., Byeon, Y. V., Buttenheim, A., Sridharan, S., Zentgraf, K., . . . Beidas, R. S. (2019). The clinician crowdsourcing challenge: Using participatory design to seed implementation strategies. *Implementation Science*, 14(1), 63. doi:10.1186/s13012-019-0914-2
2. Kirchner, J. E., Parker, L. E., Bonner, L. M., Fickel, J. J., Yano, E. M., & Ritchie, M. J. (2012). Roles of managers, frontline staff and local champions, in implementing quality improvement: Stakeholders' perspectives. *Journal of Evaluation in Clinical Practice*, 18(1), 63-69. doi:10.1111/j.1365-2753.2010.01518.x
3. Wutzke, S., Benton, M., & Verma, R. (2016). Towards the implementation of large scale innovations in complex health care systems: Views of managers and frontline personnel. *BMC Research Notes*, 9(1), 327. doi:10.1186/s13104-016-2133-0
4. Scanlon, K. A., & Woolforde, L. (2016). Igniting change through an empowered frontline: A unique improvement approach centered on staff engagement, empowerment, and professional development. *Nurse Leader*, 14(1), 38-46. doi:10.1016/j.mnl.2015.11.007

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